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Consideration of Deferred Action for Childhood Arrivals

Department of Homeland SecurityU.S. Citizenship and Immigration Services

USCIS Form I-821D OMB No. 1615-0124 Expires 06/30/2016

	Receipt Action Block
For A-	
USCIS Use Case ID:	4
Only Requestor interviewed	
on	
	narks
Resubmitted: / / Z Sent: / / To Be Completed by an Attorney or	Select this box if Form G-28 is attached to Attorney State Bar Number (if any):
Accredited Representative, if any.	represent the requestor.
► START HERE - Type or print in black ink. Read	Form I-821D Instructions for information on how to complete this form.
Part 1. Information About You (For Initial a	Removal Proceedings Information
Renewal Requests)	5. Are you NOW or have you EVER been in removal
I am not in immigration detention and I have included For	rm proceedings, or do you have a removal order issued in any
I-765, Application for Employment Authorization, and Fo I-765WS, Form I-765 Worksheet; and	orm other context (for example, at the border or within the United States by an immigration agent)?
I am requesting:	Yes No
Initial Request - Consideration of Deferred Act	ction NOTE: The term "removal proceedings" includes
for Childhood Arrivals	exclusion or deportation proceedings initiated before
OR	April 1, 1997; an Immigration and Nationality Act (INA) section 240 removal proceeding; expedited removal;
2. Renewal Request - Consideration of Deferred Action for Childhood Arrivals	reinstatement of a final order of exclusion, deportation, or
AND	removal; an INA section 217 removal after admission
For this Renewal request, my most recent period of Defen	under the Visa Waiver Program; or removal as a criminal alien under INA section 238.
Action for Childhood Arrivals expires on	If you answered "Yes" to Item Number 5., you must select a
(mm/dd/yyyy) ▶	box below indicating your current status or outcome of your
	removal proceedings.
Full Legal Name	Status or outcome:
3.a. Family Name (Last Name)	5.a. Currently in Proceedings (Active)
3.b. Given Name	5.b. Currently in Proceedings (Administratively Closed)
(First Name)	5.c. Terminated
3.c. Middle Name	5.d. Subject to a Final Order
U.S. Mailing Address (Enter the same address	5.e. Other. Explain in Part 8. Additional Information.
Form I-765)	5.f. Most Recent Date of Proceedings
4.a. In Care Of Name (if applicable)	(mm/dd/yyyy) ▶
	5.g. Location of Proceedings
4.b. Street Number	Dig. Double of A recordings
and Name	
4.c. Apt. Ste. Flr.	
4.d. City or Town	
4.e. State 4.f. ZIP Code	

Part 1. Information About You (For Initial and	Processing Information
Renewal Requests) (continued) Other Information	15. Ethnicity (Select only one box) Hispanic or Latino
6. Alien Registration Number (A-Number) (if any) ► A- 1. U.S. Social Security Number (if any) ► □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Not Hispanic or Latino 16. Race (Select all applicable boxes) White Asian Black or African American
8. Date of Birth (mm/dd/yyyy) ▶	American Indian or Alaska Native Native Hawaiian or Other Pacific Islander
9. Gender Male Female 10.a. City/Town/Village of Birth	17. Height Feet Inches 18. Weight Pounds
10.b. Country of Birth	19. Eye Color (Select only one box) Black Blue Brown Gray Green Hazel
11. Current Country of Residence12. Country of Citizenship or Nationality	Maroon Pink Unknown/Other 20. Hair Color (Select only one box)
13. Marital Status Married Widowed Single Divorced	□ Bald (No hair) □ Black □ Blond □ Brown □ Gray □ Red □ Sandy □ White □ Unknown/Other
Other Names Used (If Applicable) If you need additional space, use Part 8. Additional	Part 2. Residence and Travel Information (For Initial and Renewal Requests)
Information. 14.a. Family Name (Last Name)	1. I have been continuously residing in the U.S. since at least June 15, 2007, up to the present time. Yes No
14.b. Given Name (First Name) 14.c. Middle Name	NOTE: If you departed the United States for some period of time before your 16th birthday and returned to the United States on or after your 16th birthday to begin your current period of continuous residence, and if this is an initial request, submit evidence that you established residence in the United States prior to 16 years of age as set forth in the instructions to this form.
	For Initial Requests: List your current address and, to the best of your knowledge, the addresses where you resided since the date of your initial entry into the United States to present.
	For Renewal Requests: List only the addresses where you resided since you submitted your last Form I-821D that was approved.
	If you require additional space, use Part 8. Additional Information.

	et 2. Residence and Travel Information (For	Tra	vel Information	
	ent Address	For Initial Requests: List all of your absences from the Unit States since June 15, 2007.		
		For F	Renewal Requests: List only your absences from the	
2.a.	Dates at this residence (mm/dd/yyyy) From ▶ To ▶ Present	United States since you submitted your last Form I-821D that was approved.		
2.b.	Street Number and Name	If you require additional space, use Part 8. Additional Information.		
2.c.	Apt. Ste. Flr.	Departure 1		
2.d.	City or Town	6.a.	Departure Date (mm/dd/yyyy) ▶	
2.e.	State 2.f. ZIP Code	6.b.	Return Date (mm/dd/yyyy) ▶	
Add	ress 1	6.c.	Reason for Departure	
3.a.	Dates at this residence (mm/dd/yyyy)			
	From ► To ►	Depa	orture 2	
3.b.	Street Number and Name	7.a.	Departure Date (mm/dd/yyyy) ▶	
3.c.	Apt. Ste. Flr.	7.b.	Return Date (mm/dd/yyyy) ▶	
3.d.	City or Town	7.c.	Reason for Departure	
3.e.	State 3.f. ZIP Code			
Add	ress 2	8	Have you left the United States without advance parole on or after August 15, 2012? Yes No	
4.0	Dates at this residence (mm/dd/yyyy)		103 110	
7.4.	From To To	9.a.	What country issued your last passport?	
4.b.	Street Number and Name	9.b.	Passport Number	
4.c.	Apt. Ste. Flr.			
4.d.	City or Town	9.c.	Passport Expiration Date	
4.e.	State 4.f. ZIP Code		(mm/dd/yyyy) ▶	
		10.	Border Crossing Card Number (if any)	
Add	ress 3			
5.a.	Dates at this residence (mm/dd/yyyy)			
	From ▶ To ▶	Par	rt 3. For Initial Requests Only	
5.b.	Street Number and Name	1.	I initially arrived and established residence in the U.S. prior to 16 years of age.	
5.c.	Apt. Ste. Flr.	2.	Date of <i>Initial</i> Entry into the United States (on or about)	
5.d.	City or Town		(mm/dd/yyyy) ▶	
5.e.	State 5.f. ZIP Code	3.	Place of <i>Initial</i> Entry into the United States	

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	Transfer Tra	1-2-1	rt 4. Criminal, National Security, and Public Sety Information (For Initial and Renewal	To be a second of the
4.	Status, Status Expired, Parole Expired)		quests)	
5.a.	Were you EVER issued an Arrival-Departure Record (Form I-94, I-94W, or I-95)?	Addi	y of the following questions apply to you, use Part 8. itional Information to describe the circumstances and de a full explanation.	
	If you answered "Yes" to Item Number 5.a., provide your Form I-94, I-94W, or I-95 number (if available). If you answered "Yes" to Item Number 5.a., provide the date your authorized stay expired, as shown on Form I-94,	1.	Have you EVER been arrested for, charged with, or convicted of a felony or misdemeanor, including incident handled in juvenile court, in the United States? Do not include minor traffic violations unless they were alcoholor drug-related. Yes N If you answered "Yes," you must include a certified	_
	I-94W, or I-95 (if available). (mm/dd/yyyy) ▶		court disposition, arrest record, charging document, sentencing record, etc., for each arrest, unless disclosure is prohibited under state law.	
Education Information 6. Indicate how you meet the education guideline (e.g.,		2.	Have you EVER been arrested for, charged with, or convicted of a crime in any country other than the United States?	
	Graduated from high school, Received a general educational development (GED) certificate or equivalent state-authorized exam, Currently in school)		If you answered "Yes," you must include a certified court disposition, arrest record, charging document, sentencing record, etc., for each arrest.	0
7.	Name, City, and State of School Currently Attending or Where Education Received	3.	Have you EVER engaged in, do you continue to engage in, or plan to engage in terrorist activities?	
8.	Pote of Conduction (on Passing of a Conditions of		Yes N	10
0.	Date of Graduation (e.g., Receipt of a Certificate of Completion, GED certificate, other equivalent stateauthorized exam) or, if currently in school, date of last	4.	Are you NOW or have you EVER been a member of a gang? Yes N	10
Constitution	attendance. (mm/dd/yyyy) ▶	5.	Have you EVER engaged in, ordered, incited, assisted, otherwise participated in any of the following:	or
Mil	litary Service Information	5.a.	Acts involving torture, genocide, or human trafficking?	
9.	Were you a member of the U.S. Armed Forces or U.S. Coast Guard? Yes No	5.b.		
	u answered "Yes" to Item Number 9., you must provide onses to Item Numbers 9.a 9.d.	5.c.	Severely injuring any person? Yes N	10
9.a.	Military Branch	5.d.	Any kind of sexual contact or relations with any person who was being forced or threatened? Yes Yes	
9.b. 9.c.	Service Start Date (mm/dd/yyyy) ► Discharge Date (mm/dd/yyyy) ►	6.	Have you EVER recruited, enlisted, conscripted, or used any person to serve in or help an armed force or group while such person was under age 15? Yes N	
	Type of Discharge	7.	Have you EVER used any person under age 15 to take	
,.u.	Type of Disenarge	7.	part in hostilities, or to help or provide services to peopl in combat?	

Con	t 5. Statement, Certification, Signature, and tact Information of the Requestor (For Initial Renewal Requests)	Sig	rt 6. Contact Information, Certification, and nature of the Interpreter (For Initial and newal Requests)	
NOTE: Select the box for either Item Number 1.a. or 1.b.			erpreter's Full Name	
1.a.	I can read and understand English, and have read and understand each and every question and instruction on this form, as well as my answer to each question.	Provide the following information concerning the interpreter: 1.a. Interpreter's Family Name (Last Name)		
1.b.	The interpreter named in Part 6. has read to me each and every question and instruction on this form, as well as my answer to each question, in	1.b.	Interpreter's Given Name (First Name)	
	a language in which I am fluent. I understand each and every question and instruction on this form as translated to me by my interpreter, and have provided true and correct responses in the language indicated	2.	Interpreter's Business or Organization Name (if any)	
	above.	Int	erpreter's Mailing Address	
Req	uestor's Certification	3.a.	Street Number and Name	
	fy, under penalty of perjury under the laws of the United	3.b.	Apt. Ste. Flr.	
copies	of America, that the foregoing is true and correct and that s of documents submitted are exact photocopies of	3.c.	City or Town	
	red original documents. I understand that I may be red to submit original documents to U.S. Citizenship and	3.d.	State 3.e. ZIP Code	
	gration Services (USCIS) at a later date. I also understand nowingly and willfully providing materially false	3.f.	Province	
inforn	nation on this form is a federal felony punishable by a mprisonment up to 5 years, or both, under 18 U.S.C.	3.g.	Postal Code	
sectio	n 1001. Furthermore, I authorize the release of any nation from my records that USCIS may need to reach a	3.h.	Country	
	nination on my deferred action request.			
2.a.	Requestor's Signature	Int	erpreter's Contact Information	
2.b.	Date of Signature (mm/dd/yyyy) ▶	4.	Interpreter's Daytime Telephone Number	
Rea	uestor's Contact Information	5.	Interpreter's Email Address	
_	Requestor's Daytime Telephone Number			
4.	Requestor's Mobile Telephone Number			
5.	Requestor's Email Address			

Part 6. Contact Information, Certification, and Signature of the Interpreter (For Initial and Renewal Requests) (continued) Interpreter's Certification I certify that: I am fluent in English and sist the same language provided in Part 5., Item Number 1.b.; I have read to this requestor each and every question and instruction on this form, as well as the answer to each question, in the language provided in Part 5., Item Number 1.b.; and The requestor has informed me that he or she understands each and every instruction and question on the form, as well as the answer to each question. 6.a. Interpreter's Signature Preparer's Contact Information 4. Preparer's Contact Information 4. Preparer's Pax Number 5. Preparer's Fax Number 5. Preparer's Email Address Preparer's Email Address Preparer's Declaration		
I certify that: I am fluent in English and is the same language provided in Part 5., Item Number 1.b.; I have read to this requestor each and every question and instruction on this form, as well as the answer to each question, in the language provided in Part 5., Item Number 1.b.; and The requestor has informed me that he or she understands each and every instruction and question on the form, as well as the answer to each question. 6.a. Interpreter's Signature Preparer's Contact Information 4. Preparer's Daytime Telephone Number 5. Preparer's Fax Number Fart 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests)	Signature of the Interpreter (For Initial and	3.a. Street Number
I am fluent in English and which is the same language provided in Part 5., Item Number 1.b.; I have read to this requestor each and every question and instruction on this form, as well as the answer to each question, in the language provided in Part 5., Item Number 1.b.; and The requestor has informed me that he or she understands each and every instruction and question on the form, as well as the answer to each question. 6.a. Interpreter's Signature Preparer's Contact Information 4. Preparer's Daytime Telephone Number 5. Preparer's Fax Number Fart 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests) Preparer's Declaration, Declaration, and Renewal Requests		3.b. Apt.
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Interpretation on this form, as well as the answer to each question, in the language provided in Part 5., Item Number 1.b.; and The requestor has informed me that he or she understands each and every instruction and question on the form, as well as the answer to each question. 6.a. Interpreter's Signature Preparer's Contact Information 4. Preparer's Daytime Telephone Number 5. Preparer's Fax Number Fart 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests) Preparer's Declaration.		3.d. State 3.e. ZIP Code
In the language provided in Part 5., Item Number 1.b.; and The requestor has informed me that he or she understands each and every instruction and question on the form, as well as the answer to each question. 6.a. Interpreter's Signature 6.b. Date of Signature (mm/dd/yyyy) Preparer's Contact Information 4. Preparer's Daytime Telephone Number 5. Preparer's Fax Number Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests) Preparer's Declaration.	have read to this requestor each and every question and	3.f. Province
and every instruction and question on the form, as well as the answer to each question. 6.a. Interpreter's Signature 6.b. Date of Signature (mm/dd/yyyy) Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests) Preparer's Contact Information 5. Preparer's Fax Number 6. Preparer's Email Address Preparer's Declaration 6. Preparer's Declaration 6. Preparer's Declaration		3.g. Postal Code
4. Preparer's Daytime Telephone Number 5. Preparer's Fax Number Fart 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests) 6. Preparer's Email Address Preparer's Daytime Telephone Number 5. Preparer's Fax Number 6. Preparer's Email Address	nd every instruction and question on the form, as well as the	3.h. Country
4. Preparer's Daytime Telephone Number 6.b. Date of Signature (mm/dd/yyyy) 5. Preparer's Fax Number Fart 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests) 6. Preparer's Email Address Preparer's Daytime Telephone Number 6. Preparer's Fax Number 6. Preparer's Email Address	.a. Interpreter's Signature	Preparer's Contact Information
Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests) Preparer's Preparer's Declaration Preparer's Declaration	.b. Date of Signature (mm/dd/yyyy) ▶	
Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and Renewal Requests) Preparer's Email Address Preparer's Declaration		5. Preparer's Fax Number
Preparer's Full Name Preparer's Declaration	Signature of the Person Preparing this Request, If Other than the Requestor (For Initial and	
	Preparer's Full Name	Preparer's Declaration
		I declare that I prepared this Form I-821D at the requestor's behest, and it is based on all the information of which I have knowledge.
7.a. Preparer's Signature		7.a. Preparer's Signature
1.b. Preparer's Given Name (First Name)	.b. Preparer's Given Name (First Name)	
7.b. Date of Signature (mm/dd/yyyy) ▶ 2. Preparer's Business or Organization Name NOTE: If you need extra space to complete any item withis request, see the next page for Part 8. Additional Information.	Preparer's Business or Organization Name	NOTE: If you need extra space to complete any item within this request, see the next page for Part 8. Additional

	rt 8. Addition	onal Information (For Initial and	4.a.	Page Number	4.b. Part Number	4.c. Item Number
If your request page and A indic	u need extra spacest, use the space to complete and A-Number (if arate the Page Number	ace to complete any item within this the below. You may also make copies of this diffile with this request. Include your name the sy) at the top of each sheet of paper; the synthesis and sign and date each sheet.	4.d.			
Ful	l Legal Name					
1.a.						
1.b.	Given Name (First Name)					
1.c.	Middle Name					ž.
2.	A-Number (if	any) ▶ A-				
3.a.	Page Number	3.b. Part Number 3.c. Item Number				
3.d.						
			5.a.	Page Number	5.b. Part Number	5.c. Item Number
			5.d.		Ð	
				-		
					- N	
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				-		
			6.a.	Signature		
			6 h	Date of Signat	ure (mm/dd/nnnv) I	▶